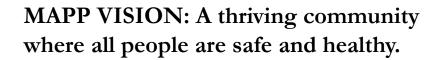
Community Health Assessment Update

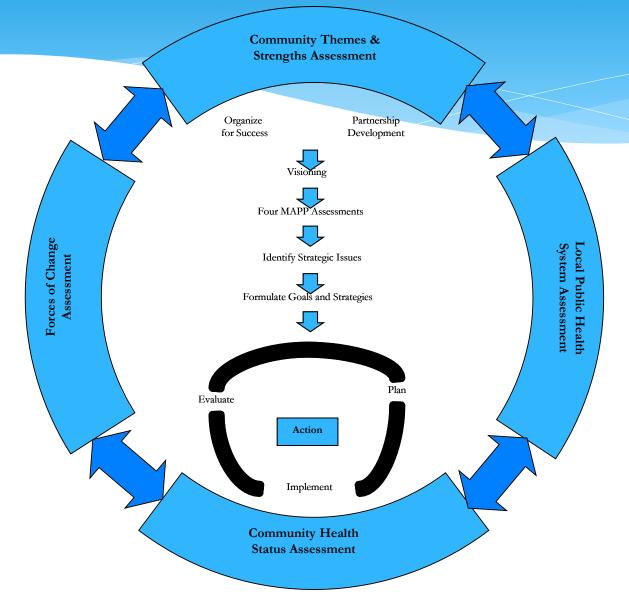
LLCHD Board of Health Meeting

October 13, 2015





MAPP Process Illustration



MAPP Timeline/Process

LLCHD MAPP Phase/Description of	2015						
Activity	April	May	June	July	August	Sept	
4 MAPP Assessments					CHIP	CHIP	
Community Themes & Strengths Assessment							
Hold community dialogues and focus groups							
Develop/disseminate/collect community survey							
Conduct interviews with residents/key leaders							
Compile results/identify challenges and opportunities							
Public Health System Assessment							
Prepare to update LPHSA/establish subcommittee							
Respond to performance measures instrument							
Discuss results/identify challenges and opportunities							
Community Health Status Assessment							
Conduct data collection of core indicators							
Select and collect additional indicators as needed							
Forces of Change Assessment							
Prepare for the Forces of Change Assessment							
Hold brainstorming session with committee							
Simplify list/identify threats and opportunities						LINC	

Community Health Status Data – 11 Core Elements

- * 1. Demographic Characteristics
- * 2. Socioeconomic Characteristics
- * 3. Health Resource Availability
- * 4. Quality of Life
- * 5. Behavioral Risk Factors
- * 6. Environmental Health Indicators

- * 7. Social and Mental Health
- * 8. Maternal and Child Health
- * 9. Death, Illness and Injury
- * 10. Infectious Disease
- * 11. Sentinel Events



Population Data, County and City

- The 2014 estimated population for Lancaster County is 301,795; 2013 = 297,285 (2010 Census = 285,407)

 Lincoln's Population is estimated at 272,996 for 2014; 268,955, 2013 (2010 Census = 258,379)
- * Rough population sizes by age group:
 - * Under 5: 22,000
 - * 0 to 17: 75,000
 - * 18 and over: **225,000**
 - * 18 to 64: **200,000**
 - * 20 to 34: 78,000
 - * 65 and older: 34,000
 - * 85 and older: 5,000



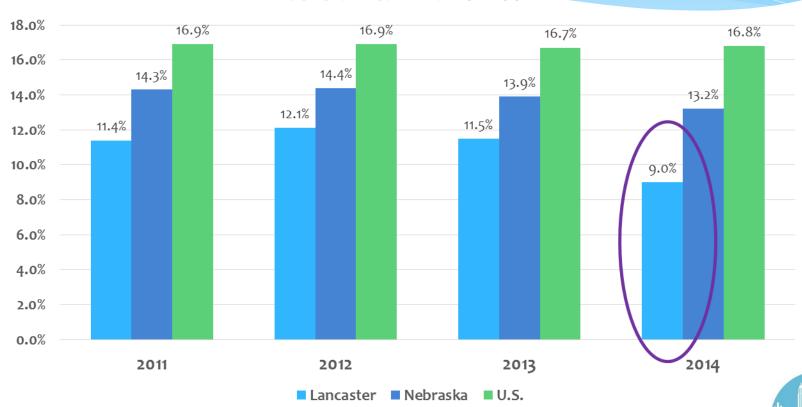
Population, Race/Ethnicity

- * American Community Survey 2009-2013 Estimates:
- * Total Population: 289,873
- * Hispanic or Latino (of any race): 17,513
- * Not Hispanic: 272,360
 - * White alone: 243,529
 - Black or African American alone: 10,501
 - American Indian/Alaskan Native alone: 1,578
 - * Asian alone: 10,746
 - Two or more races: 5,671



Another Area Where We Shine

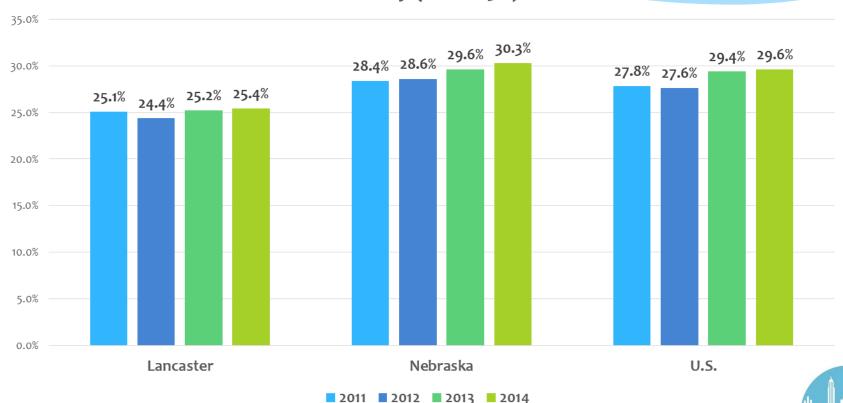
General Health Fair or Poor



Another Area Where We Shine

Lancaster County Rates are Statistically Better than Nebraska Rates, All Years

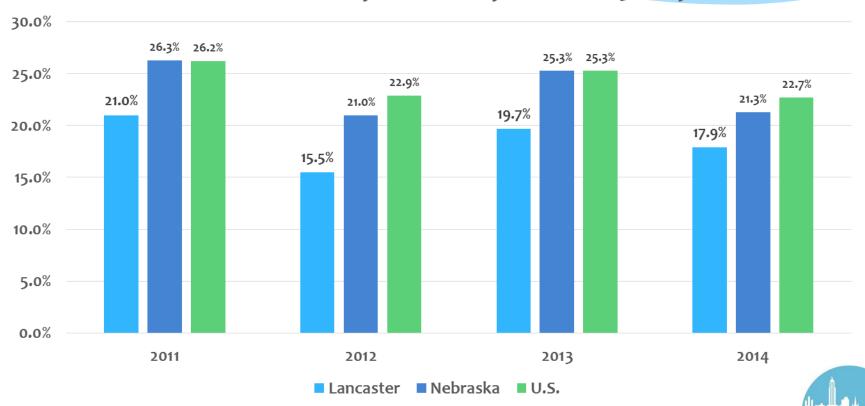
Obesity (BMI > 30)



Another Area Where We Shine

Lancaster County Rates are Statistically Better than Nebraska Rates, All Years

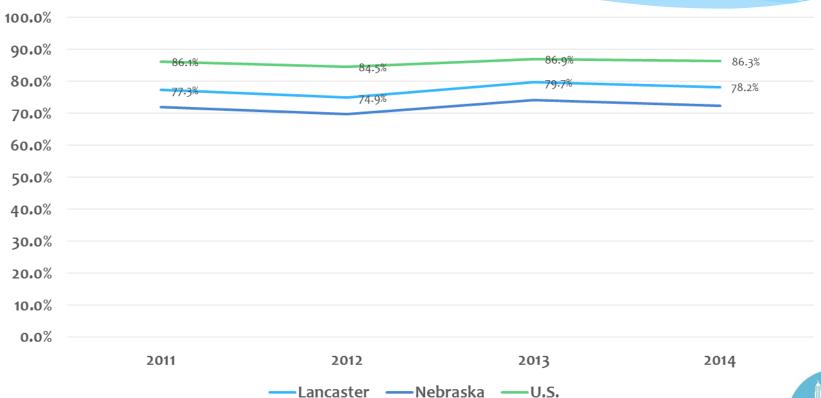
No Leisure-time Physical Activity in the Past 30 Days



Another Area Where We Shine?

Lancaster County Rates are Statistically Better than Nebraska Rates, All Years

Always Wear a Seat Belt

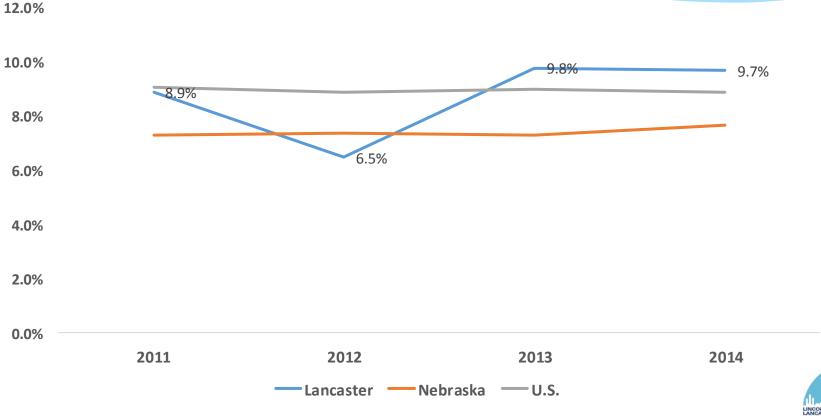




An Area Where We Fair Poorly

2014 County Rate is Statistically Worse than Nebraska Rate

Currently Have Asthma

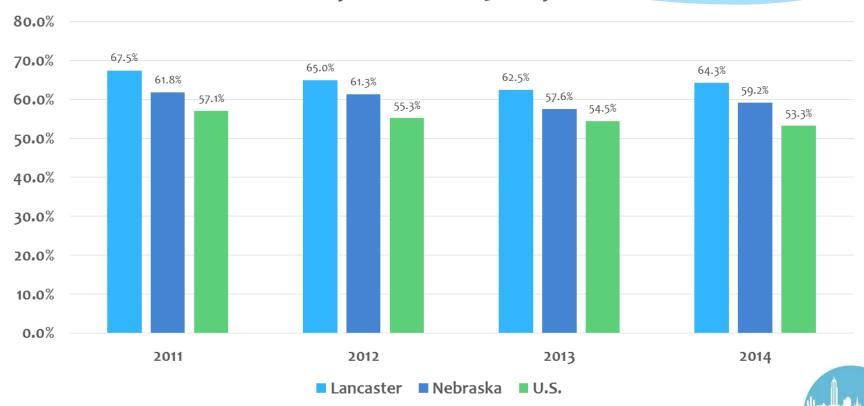




Another Area Where We Fair Poorly

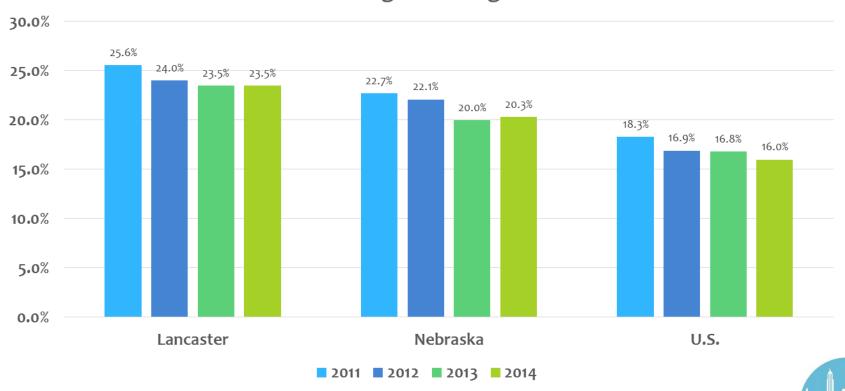
County Rate is Statistically Worse than Nebraska Rate, Except in 2012

Any Alcohol Last 30 Days

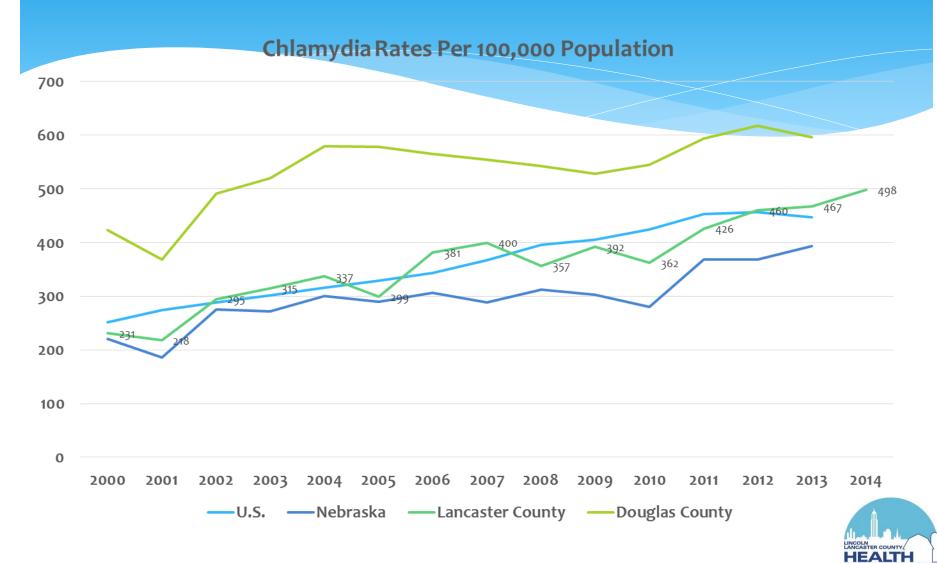


Another Area Where We Fair Poorly

Binge Drinking



Another Area Where We Fair Poorly



Comparison with the CHSI Peers (Community Health Status Indicators)

Better

- Coronary Heart Disease deaths
- Female Life Expectancy
- Motor Vehicle Deaths
- Unintentional Injury
- Adult Overall Health Status
- Older adult asthma
- Syphilis
- * Unemployment
- Access to parks
- * Annual average PM2.5 concentration
- Limited access to healthy food

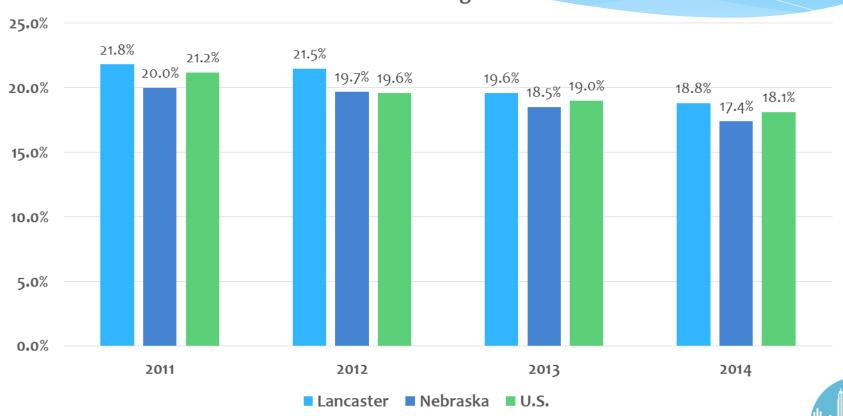
Worse

- Chronic lower respiratory disease (CLRD) deaths
- * Gonorrhea
- Older adult preventable hospitalizations
- * Adult smoking
- * Poverty
- * Violent crime

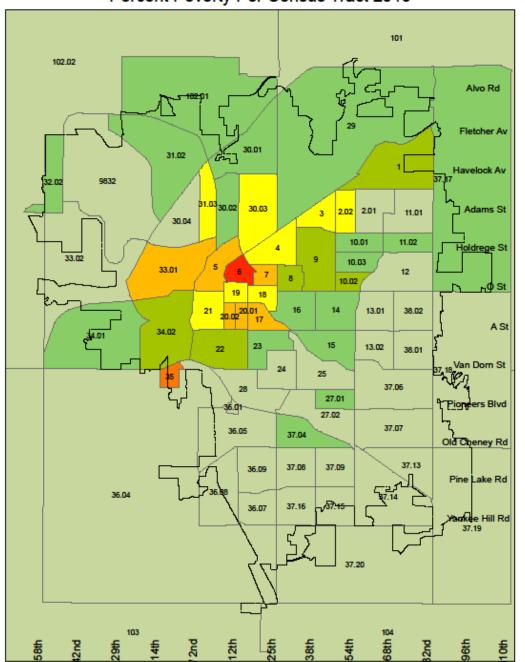
http://wwwn.cdc.gov/CommunityHealth/profile/currentprofile/NE/Lancaster/

Smoking Rates Have Dropped

Current Smoking Rates



Percent Poverty Per Census Tract 2013





Legend

Highest Ranked Issues As Scored Upper Quartile

- Diabetes (overall & minorities)
- * STIs (Chlamydia & Gonorrhea)
- * Excessive and Binge Drinking
- Distracted Driving
- * Obesity
- * Mental Health
- * Hypertension
- Inadequate Prenatal Care
- Colorectal Cancer Screening
- Physical Inactivity
- * Violence/Abuse
- * Suicide (15-24)

- Falls (elderly)
- * Food Insecurity
- * Substance Abuse (including prescription drugs)
- * Heart Disease
- * Smoking
- * Dental Caries
- * Breast Cancer Mortality
- * LBW Babies (African Americans)
- Child Abuse/Neglect
- * Uninsured/Access (including behavioral health & dental)



Issues Where There is Ongoing Effort or Separate Strategic Plan

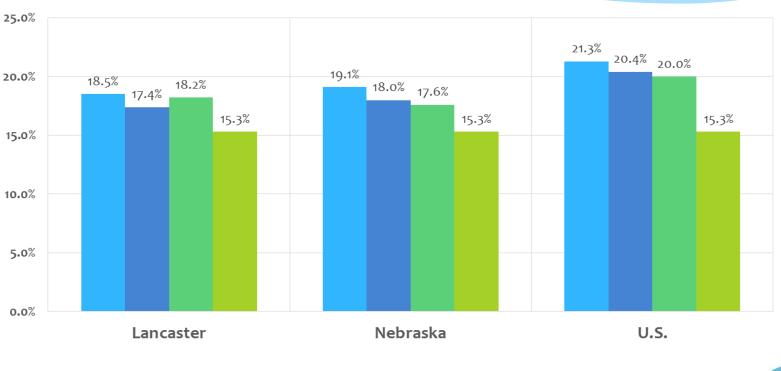
- Diabetes (overall & minorities)
- STIs (Chlamydia & Gonorrhea)
- * Excessive and Binge Drinking
- Distracted Driving
- * Obesity
- * Mental Health
- * Hypertension
- Inadequate Prenatal Care
- Colorectal Cancer Screening
- Physical Inactivity
- * Violence/Abuse
- * Suicide (15-24)

- Falls (elderly)
- Food Insecurity
- Substance Abuse (including prescription drugs)
- * Heart Disease
- * Smoking
- Dental Caries
- * Breast Cancer Mortality
- * LBW Babies (African Americans)
- Child Abuse/Neglect
- * Uninsured/Access (including behavioral health & dental)



Health Insurance, 2011 - 2014

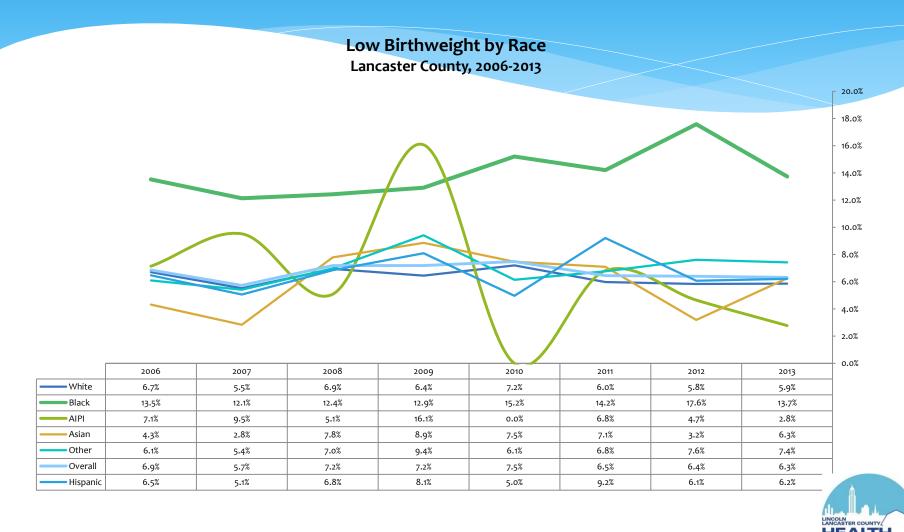
No Health Coverage, 18 to 64



2011 2012 2013 2014



LBW Babies Differ by Race/Ethnicity



Links to Data

County Health Rankings:

http://lincoln.ne.gov/city/health/data/CHR.htm

BRFSS Data:

http://lincoln.ne.gov/city/health/data/brfss/index.htm

YRBS Data:

http://lincoln.ne.gov/city/health/data/yrbss/index.htm

Vital Statistics Data:

http://lincoln.ne.gov/city/health/data/vitalstats/



Community Themes and Strengths Assessment

The Community Themes and Strengths Assessment is intended to answer the questions such as:

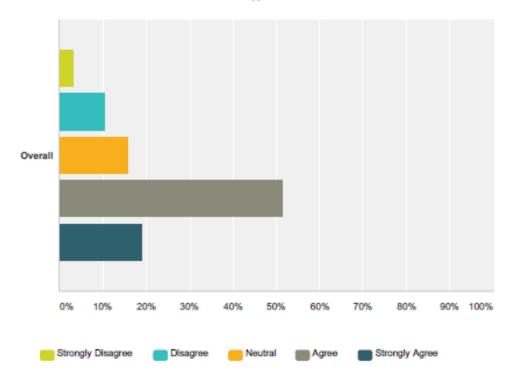
- What is important in our community?
- How is the quality of life perceived in our community?
- What assets do we have that can be used to improve community health?



Community Themes and Strengths

Q6 I am satisfied with the health care system (public health, hospitals, doctors, behavioral health services, medical clinics) in Lincoln and Lancaster County.





	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Total
Overall	3.10%	10.47%	15.89%	51.55%	18.99%	
	8	27	41	133	49	258



CTS Survey: Now, thinking about what you know from your personal experiences and/or the experiences of others you know, what do you think are the 3 most important "health problems" in your community (problems that have the greatest impact on overall community health)? [Which would be the first to address?]

- * Mental/behavioral health issues—59.7% [1—31.5%]
- * Obesity—53.5% [2—21.8%]
- * Substance or drug abuse/overdose [T5—4.7%]
- * Health disparities/inequities[3—12.5%]
- * Diabetes [4—5.4%]
- * Aging problems [T5—4.7%]
- * Cancers
- * Heart disease and stroke
- * Child abuse/neglect [T5—4.7%]
- * Domestic violence

- * Suicide
- * Infectious disease
- * High blood pressure
- * Teenage pregnancy
- * Sexually transmitted diseases
- * Dental problems
- * Unintentional injuries
- Respiratory/lung disease
- * Rape/sexual assault



Forces of Change Assessment

The Forces of Change Assessment answers questions such as:

- * What is occurring or might occur that affects the health of our community or the local public health system?
- * What specific threats or opportunities are generated by these occurrences?



Forces That Influence Health and the Quality of Life in the Community

- * Trends are patterns over time, such as migration in and out of a community or a growing elderly population.
- * Factors are discrete elements, such as a community's large college-age population.
- * Events are one-time occurrences, such as a natural disaster, or the passage of new legislation.



- * Drivers distracted by texting or talking on the phone.
- * Baby boomers are healthy but there will be fixed incomes when they retire that will result in higher health costs, hunger issues, mental health, and isolation.
- * Antelope Valley stopped flooding which is a positive; but as a negative, it pushed people out.
- * Increased housing costs for rental properties.
- * Diversity and new cultures in Lincoln with different needs.
- * Primary care in north Lincoln is low.

- * Lack of health care resources in north and northeast Lincoln.
- * Lincoln is a growing community; however, it is lopsided south and southeast growing and north is not.
- Flexible funding for health (CHE)
- * Working poor and the pressures that go with poverty.
- * Managed care contracts we will have to do a lot more with these people.
- * Fatigue in non-profit community trends going in wrong direction; asking more of our schools; want to cut back on schools.

- * Behavioral health services for children
- * Attempted child abduction. Kids are not safe around low-income schools.
- Schools are being locked for safety reasons.
- * Increased interest in bikes.
- Protected bike way bike sharing Star Tran bike rack
- * There is no cross-town public transportation in the evenings and on weekends.
- * Travel times across Lincoln are long.
- * Community Health Endowment is a positive.

- * Great recreational opportunities trails and parks.
- * Streets Alive is a positive.
- * "Girls on the Run" is a positive.
- * Affordable Care Act is a positive and a negative.
- * All schools in Lancaster County are a positive.
- * Health 360 is a positive.
- * Almost everyone can get a medical home but awareness and education is still lacking.
- * Some providers are still back logged (Peoples Health Center)

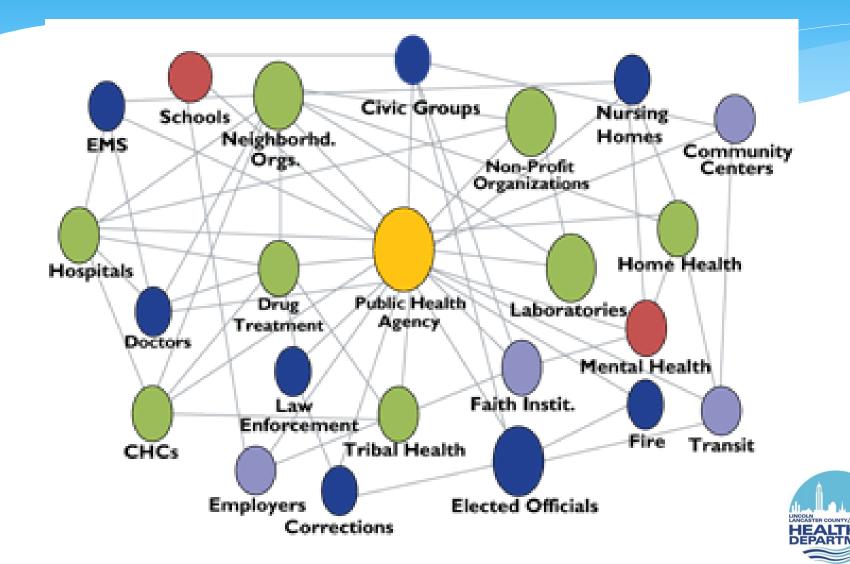
- * The long-standing non-profits in Lincoln have stood the test of time.
- * Hospitals in Lincoln are active and communicate with each other.
- * Independent physicians.
- * Hospital work with their local health department.
- * With the university, STDs are up.
- * Innovation Campus is a positive.
- Economic conditions in Lincoln are a positive.
- * Increased poverty outside the core.

Public Health System Assessment

- * https://www.surveymonkey.com/r/PFG9K3Z
- * Survey agencies and organizations that make up our local public health system.
- * Conduct the Local Public Health Performance Standards evaluation.



Public Health System

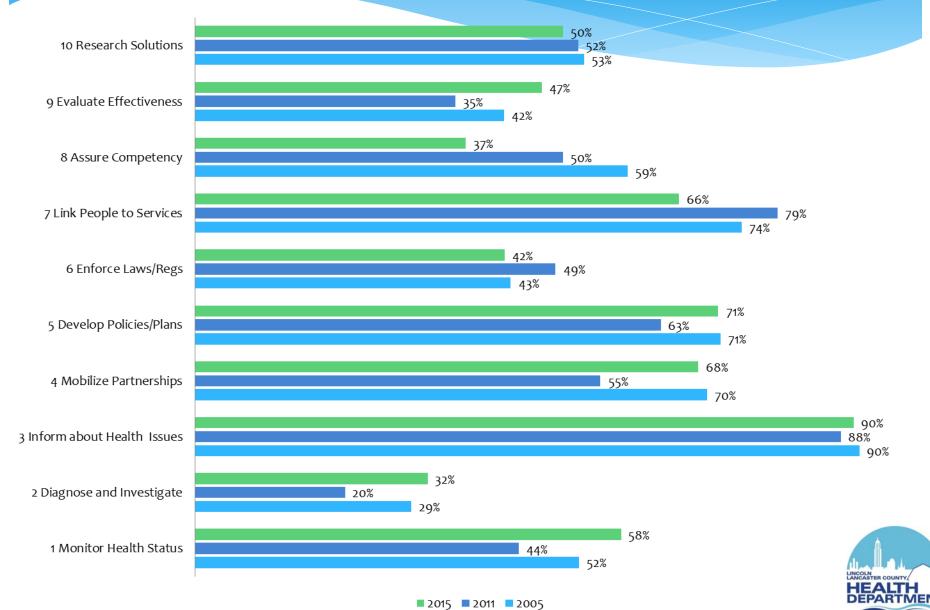


Ten Essential Services of Public Health

- * Monitor Health
- * Diagnose and Investigate
- * Inform, Educate and Empower
- Mobilize Community Partnerships
- Develop Policies
- * Enforce Laws
- Link to/Provide Care
- * Assure Competent Workforce
- * Evaluate
- * Research

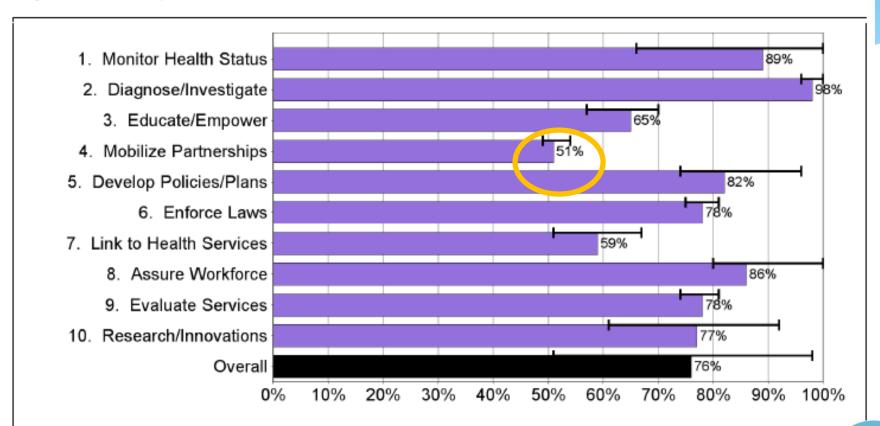






NPHPS Results—Local Public Health System [EPHS = Essential Public Health Service]

Figure 1: Summary of EPHS performance scores and overall score (with range)



Community Health Improvement Plan (2013)

http://lincoln.ne.gov/city/health/data/MAPP.htm

Four Priorities:

- * Access to care
- * Behavioral Health
- Injury Prevention
- * Chronic Disease Prevention



Highest Ranked Issues

- Diabetes (overall & minorities)
- Excessive and Binge Drinking
- Distracted Driving
- * Obesity
- * Mental Health
- * Hypertension
- Inadequate Prenatal Care
- Physical Inactivity
- * Violence/Abuse
- * Suicide (15-24)

- * Falls (elderly)
- * Substance Abuse (including prescription drugs)
- * Heart Disease
- * Smoking
- Breast Cancer Mortality
- * LBW Babies (African Americans)
- * Uninsured/Access (including behavioral health & dental)



Discussion and Questions?





Where Are We At?

- * We will finish the community assessment via the MAPP process this week. All four MAPP assessments are nearly complete and the final step is to write up the results and include them in a Community Profile.
- * The CHIP (Community Health Improvement Plan) is being updated and will be complete after the last committee meets in November. There have been updates and revisions made to the 2013 CHIP objectives and strategies.



Next Steps

* Finalize the Community Health Profile and CHIP and post to the web page and ask for public comment.

